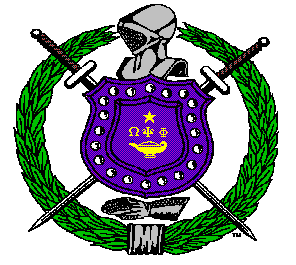
#### Omega Psi Phi Fraternity, Inc.



#### Eta Omega Chapter’s Dr. Alfred D. Wyatt, Sr.

#### Talent Hunt Guidelines

##### ALL APPLICATIONS MUST BE RECEIVED BY MAY 1, 2017

**HISTORY**

The Talent Hunt is an internationally mandated program of Omega Psi Phi Fraternity, Inc. is one of several national programs designed to identify and support the youth of our nation and the world. The original program was created by Brother J. Austin Atkins of Winston Salem, North Carolina, and Brother Dewey Duckett of Rock Hill, South Carolina. While the idea was conceived in 1945, the first District Talent Hunt program was held in the Sixth District in Charlotte, North Carolina, on April 19, 1946. The necessity for the Talent Hunt program was born out of the unequal opportunity afforded to some American youth to develop and give full expression to their artistic and creative talents.

**ShieldOmega Psi Phi Fraternity, Inc.**

# Talent Hunt Competition Rules

1. Contestant must be a high school student who has not advanced to their senior year at time of the Local Talent Hunt.
2. Contestants who are “Home Schooled” must present verification from their school district that they are enrolled as a high school students.

3. The competition is open to the following forms of trained art:

A. Music: Vocal and Instrumental; classical, semi-classical, gospel, jazz, and "middle of the road".

B. Dance: Interpretative movement to music; ballet, modern dance, tap dance.

C. Speech/Drama: Poetry, readings, orations, monologues, etc.

4. Selections performed must be memorized and should not exceed five (5) minutes. Failure to memorize selection or exceeding five minutes will affect your rating.

5. Copies of music performed or Oral presentation being made must be provided prior to performing.

6. If you require accompaniment you should arrange for it in advance of the performance.

7. Among the areas considered in judging your performance are: tone, stage presence, technique, dynamics, and memorization.

8. Other than costumes for their performance, participants are expected to dress appropriately for this occasion. As a minimum, dress should comply with standards established by the Local School System performing arts or music departments.

9. This competition is the first of four levels of Competition:

A. **Local** - Each chapter in Georgia sponsors a local Talent Hunt Program.

B. **State** - The first place winners of each local Talent Hunt in Georgia compete against each other to represent Georgia at the next level of competition, the District.

C. **District** - The first and second place winners from Alabama, Florida, Georgia and Mississippi compete for the Seventh District title.

D. **National** - The first place winner from each of twelve District Talent Hunt Programs will perform at the Grand Conclave as a demonstration of excellence enhancing culture through the performing arts.

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# TALENT HUNT APPLICATION

# (All information must be typed)

Contestant’s Name Age

Contestant’s E-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address City State /Zip

Parents or Guardian Telephone

Chapter/District

Chapter Talent Hunt Chairman:  **Ernest E. Perry\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Chairman Telephone (Cell) **404 788-2915**  Email: [**perr937@bellsouth.net**](mailto:perr937@bellsouth.net)

Name of High School Grade

Grade Point Average (GPA) \_\_\_\_\_\_\_\_\_ SAT Score \_\_\_\_\_\_\_\_\_\_\_\_ ACT Score \_\_\_\_\_\_\_\_\_\_\_\_

Extra Curricula Activities (School/ Community)

Honors and Awards Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Church Membership

Hobbies

College /University You Plan to Attend

City State Major

**Category you will compete In Select One:**

Semi Classical Instrumental Solo \_\_\_\_\_\_ Classical Instrumental Solo \_\_\_\_\_ Jazz \_\_\_\_\_\_\_ Gospel \_\_\_\_\_

Semi Classical Vocal Solo \_\_\_\_\_\_ Classical Vocal Solo \_\_\_\_\_\_\_ Piano Solo \_\_\_\_\_\_\_\_\_\_\_

Drama Interpretations \_\_\_\_\_\_ Dance \_\_\_\_\_\_\_\_\_\_\_\_ Visual Arts \_\_\_\_\_\_\_\_\_\_

Name of Composition/Presentation

Name of Composer

Please check which of the following you will need for your performance:

a) Piano b) Microphone c) Cassette Player

d) Accompanist \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e) CD Player \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

f) Other (please be specific)

(**Note: You are required to provide any electronic equipment required and an operator**.)

**Note: A 4x6 photograph (high resolution bust shot photo 300 dpi or higher - No cell phone, I-pad or scanned photos) and a biographical sketch of 100 words or less must accompany this form.**

**Please contact the Talent Hunt Chairman to confirm receipt of your completed application.**

**Shield**

**Omega Psi Phi Fraternity, Inc.**

**Parental Release and Consent Form**

**Talent Hunt Competition**

**Parental release and consent form** (submit by start of event)

Student’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physical address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or legal guardian’s name:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please print)

Contact phone numbers during event hours: (home): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (cell):\_\_\_\_\_\_\_\_\_\_

**Insurance information:**

Insurance coverage by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Policy Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Photo and Image Release:**

I give the Omega Psi Phi Fraternity, Inc. permission to photograph, videotape, or record my child and to use the pictures, videotape, film or recording in its print and electronic publications, video broadcasts, radio broadcasts or any other presentation of the images. I agree that the photographs and videotapes, including negatives, slides and prints or any other presentation of the images, are the property of the Omega Psi Phi Fraternity, Inc. I waive any right I may have to inspect and/or approve the finished product in which the images may be used. By signing this form, I intend to release and discharge the Omega Psi Phi Fraternity, Inc. from any and all claims that I may have, and agree to hold harmless and defend the Omega Psi Phi Fraternity, Inc. from liability arising from claims or litigation arising from its use of my child’s image, voice, or performance.

**Waiver and Consent for Emergency Treatment:**

I am aware that the activity for which I am registering my child involves limited events or field trips that will be conducted as part of this activity. In consideration of the right to participate in this activity, I waive and release any and all rights and claims for damage I may have against the Omega Psi Phi Fraternity, Inc., its Board of Directors, District or local officials, members, employees and agents, for any and all injuries, if any, suffered by my child while participating in this activity. I give my consent to emergency treatment, including hospitalization as may be needed for the welfare of my child

**If you are under the age of 21, your parent/guardian must also sign this form.**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Student’s Signature) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Print Parent/Guardian Name) (Parent/Guardian Signature)